

GEORGIA COMPOSITE BOARD OF PROFESSIONAL COUNSELORS, SOCIAL WORKERS AND MARRIAGE AND FAMILY THERAPISTS 237 Coliseum Drive

Macon, Georgia 31217-3858 (478) 207-2440 [Telephone] * (866) 888-7130 [Fax] www.sos.state.ga.us

MARRIAGE AND FAMILY THERAPIST REQUEST FOR RE-EXAMINATION

INSTRUCTIONS NO FAXED FORMS ACCEPTED.

- Please print or type.
- Complete this form and submit to the Georgia Composite Board of Professional Counselors, Social Workers, and Marriage and Family Therapists.
- Indicate the date on which you wish to take the MFT Examination.
- Return this form to the address above.

First	Middle	L	ast	Maiden
ADDRESS:				
Street	City	State	Zip (Code
Have you previously applied to take an examination?				
Have you changed your name since your last application for examination was filed?				
If "Yes," please attach a copy of your marriage certificate, divorce degree, court order, etc., so that your record can be corrected.				
□Yes □No Have you changed your address since your last application for examination?				
HOME PHONE: ()		OTHER PHONE: ()		
E-Mail Address:				
*SOCIAL SECURITY NUMBER: * This information is authorized to be obtained & disclosed to State & Federal agencies pursuant to O.C.G.A.§19-11-1 & O.C.G.A.§ 20-3-295, 42 U.S.C.A.§ 551 & U.S.C.A.§ 101.				
I WISH TO TAKE THE:				
MFT EXAMINATION [THROUGH PES] on:				
Signature of Applicant				
	Street Have you previousl Have you changed If "Yes," please atta so that your record Have you changed NE: () Pess:	Street City Have you previously applied to take a Have you changed your name since y If "Yes," please attach a copy of your r so that your record can be corrected. Have you changed your address since NE: () PSS:	Street City State Have you previously applied to take an examination? Have you changed your name since your last application If "Yes," please attach a copy of your marriage certificate, so that your record can be corrected. Have you changed your address since your last applicate. NE: () OTHER PHONE: OTHER PHON	Street City State Zip of Have you previously applied to take an examination? Have you changed your name since your last application for examination If "Yes," please attach a copy of your marriage certificate, divorce degree, so that your record can be corrected. Have you changed your address since your last application for examination NE: () OTHER PHONE: () Pess: CURITY NUMBER: Is authorized to be obtained & disclosed to State & Federal agencies pursuant to O.C.G.A.§19-11-1 & O. & U.S.C.A.§ 101. AKE THE: EXAMINATION [THROUGH PES]